

TENNESSEE DEPARTMENT OF EDUCATION

Office of Teacher Licensing
5th Floor Andrew Johnson Tower
710 James Robertson Parkway
Nashville, Tennessee 37243-0377
(615) 532-4885

APPLICATION FOR ALTERNATIVE LICENSE A and INTERIM LICENSE B

PART I TO BE COMPLETED BY APPLICANT

_____ Application for Initial Alternative License A _____ Application for renewal of Alternative License A
_____ Application for Initial Interim License B _____ Application for renewal of Interim License B

REGULATIONS FOR ISSUANCE AND/OR RENEWAL ARE ATTACHED TO THIS FORM

If you have previously held a Tennessee Teacher License/Certificate, state: Type _____ Reference Number _____

Last Name		First Name		Middle/Maiden	
Social Security Number		Telephone Number		Date of Birth	* Sex * Race
Street/P.O. Box		City		State	Zip Code

_____ **Name/Address Change** *Optional *Statistical information only*
(provide a notarized copy of the marriage license, divorce decree, or court order that has generated the legal name change.)

Answer the following question if you have NEVER held any type of Tennessee Teacher License or Tennessee Teacher Permit.

Are you addicted to the use of intoxicants or narcotics, have you ever been convicted of a felony (including a conviction plea of nolo contendere), or have you ever falsified or altered documentation required for licensure? _____ YES _____ NO

All information enclosed with this packet is correct. I understand that the penalty for falsifying information to obtain a license is denial of that license.

Signature _____ **Date** _____

Answer the following questions if you have EVER held a Tennessee Teacher License or Tennessee Teacher Permit.

Since your license was last issued or renewed have you been convicted of a felony (including a plea of nolo contendere), used narcotics or intoxicants improperly, been convicted of possessing narcotics, falsified documentation required for licensure, or altered your license or certificate? _____ YES _____ NO

All information enclosed with this packet is correct. I understand that the penalty for falsifying information to obtain a license is denial of that license.
license. **Signature** _____ **Date** _____

PART II TO BE COMPLETED BY SCHOOL SYSTEM SUPERINTENDENT/DIRECTOR

OFFICIAL TRANSCRIPTS FROM ALL COLLEGES/UNIVERSITIES ARE ATTACHED

LICENSURE IS REQUESTED IN THE FOLLOWING AREA(S) OF ENDORSEMENT

ENDORSEMENT

ENDORSEMENT CODE

_____	_____
_____	_____
_____	_____

IT IS OUR INTENTION TO EMPLOY THE APPLICANT AT THE FOLLOWING LEVEL DURING THE SCHOOL YEAR
_____ to _____

_____ Pre-K _____ Elementary _____ Secondary (If secondary, give the subject area _____)

I understand that if the applicant is hired, I am obligated to assign a mentor to the applicant.

School System	Signature of Superintendent/Director	Date
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This form MUST be signed by the superintendent/director of the employing system before submission.

The Alternative/Interim License is issued ONLY at a Tennessee School System's request with the above signed intention of employment.